

Docket #: ATI000142

**RULES 63 AND 67 (37 C.F.R. 1.63 and 1.67)**  
**DECLARATION AND POWER OF ATTORNEY**

**FOR UTILITY/DESIGN/CIP/PCT NATIONAL APPLICATIONS**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **APPARATUS FOR HIGH DATA RATE SYNCHRONOUS INTERFACE AND METHOD THEREOF**, the specification of which: (mark only one)

- X   (a) is attached hereto.
- (b) was filed on XXXXXXXXXX as Application Serial No. XXXXXXXXXXXX and was amended on        (if applicable)
- (c) was filed as PCT International Application No.        on        and was amended on        (if applicable).
- (d) was filed on        as Application Serial No.        and was issued a Notice of Allowance on       .
- (e) was filed on        and bearing attorney docket number       .

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment referred to above or as allowed as indicated above.

I acknowledge the duty to disclose all information known to me to be material to the patentability of this application as defined in 37 CFR § 1.56. If this is a continuation-in-part (CIP) application, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability of the application as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this CIP application.

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I hereby claim foreign priority benefits under 35 U.S.C. § 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate filed by me or my assignee disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which my priority is claimed or, (2) if no priority is claimed, before the filing date of this application:

PRIOR FOREIGN PATENTS					
Number	Country	Month/Day/Year Filed	Date first laid-open or Published	Date patented or Granted	Priority Claimed Yes No

I hereby claim the benefit under 35 U.S.C. § 120/365 of any United States application(s) listed below and PCT international applications listed above or below:

PRIOR U.S. OR PCT APPLICATIONS

<u>Application No. (series code/serial no.)</u>	<u>Month/Day/Year Filed</u>	<u>Status(pending, abandoned, patented)</u>
XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX

I hereby appoint Sally Daub, Reg. No. 41,478, and J. Gustav Larson, Reg. No. 39,263 as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application, provisionals thereof, continuations, continuations-in-part, divisionals, appeals, reissues, substitutions, and extensions thereof and to transact all business in the United States Patent and Trademark Office connected therewith.

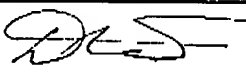
Please address all correspondence and direct all telephone calls to:

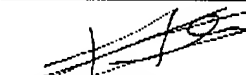
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## NAMED INVENTOR(S)

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Same as Residence Address <b>Post Office Address</b> (include zip code)			

(FOR ADDITIONAL INVENTORS, check here \_\_\_\_ and add additional sheet for inventor information regarding signature, name, date, citizenship, residence and address)